



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 1414 L Street, N.W.  
 Alexandria, Virginia 22313-1450  
[www.uspto.gov](http://www.uspto.gov)

## \*BIBDATASHEET\*

CONFIRMATION NO. 1252

Bib Data Sheet

|                             |                                       |              |                        |                                    |
|-----------------------------|---------------------------------------|--------------|------------------------|------------------------------------|
| SERIAL NUMBER<br>10/081,709 | FILING DATE<br>02/20/2002<br><br>RULE | CLASS<br>607 | GROUP ART UNIT<br>3762 | ATTORNEY<br>DOCKET NO.<br>A02P1017 |
|-----------------------------|---------------------------------------|--------------|------------------------|------------------------------------|

## APPLICANTS

Gabriel A. Mouchawar, Valencia, CA;

James D. Causey III, Simi Valley, CA;

Kelly H. McClure, Simi Valley, CA; J. Christopher Moulder, Sherman Oaks, CA;

Paul A. Levine, Santa Clarita, CA;

## \*\* CONTINUING DATA \*\*\*\*\*

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 03/18/2002

| Foreign Priority claimed        | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no  | STATE OR | SHEETS  | TOTAL  | INDEPENDENT |
|---------------------------------|--|----------|---------|--------|-------------|
| 35 USC 119 (a-d) conditions met | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance | COUNTRY  | DRAWING | CLAIMS | CLAIMS      |
| Verified and Acknowledged       | Examiner's Signature Initials  | CA       | 4       | 53     | 4           |

## ADDRESS

36802  
 PACESETTER, INC.  
 15900 VALLEY VIEW COURT  
 SYLMAR , CA  
 91392-9221

## TITLE

Implantable cardiac stimulation device having automatic sensitivity control and method

|                  |   |  |
|------------------|---|--|
| FILING FEE       | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><br><input type="checkbox"/> 1.16 Fees ( Filing )<br><br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><br><input type="checkbox"/> 1.18 Fees ( Issue ) |
| RECEIVED<br>1548 |   |  |

1548

1.18 Fees ( Issue )

Other \_\_\_\_\_

Credit